

Maryland Catholic Conference_FAV_SB784.pdf

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Position: FAV



MARYLAND
CATHOLIC
CONFERENCE

March 8, 2023

Senate Bill 784

Health Insurance - Labor and Delivery Services - Cost-Sharing Requirements

Senate Finance Committee

Position: Favorable

The Maryland Catholic Conference is the public policy representative of the three (arch)dioceses serving Maryland, which together encompass over one million Marylanders. Statewide, their parishes, schools, hospitals, and numerous charities combine to form our state's second largest social service provider network, behind only our state government.

Senate Bill 784 requires certain insurers, nonprofit health service plans, and health maintenance organizations to provide coverage for labor and delivery services. The bill states that specific insurers that provide labor and delivery coverage to individuals or groups on an expense-incurred basis shall cover labor and delivery services without a deductible, co-insurance, co-payment, or any other cost-sharing requirement.

According to Forbes, giving birth costs \$18,865 on average, including pregnancy, delivery, and postpartum care. While health insurance can cover most of that cost, there are still additional fees that are not covered. The average out of pocket cost for health insurance plan members (for childbirth) is close to \$3,000, and without insurance, the average cost is around \$18,865.¹

Providing coverage for labor and delivery services for mothers should be a proposition that is unifying. Maryland must leave behind the disproportionate financial burdens imposed on mothers and families and construct a new path that transcends the existing model. All Marylanders should invest in the family by supporting policies that promote and uplift mothers and their children such as providing coverage for labor and delivery services.

For these reasons, the Maryland Catholic Conference asks for a favorable report on **SB 784**.

Thank you for your consideration.

¹ <https://www.forbes.com/advisor/health-insurance/average-childbirth-cost/>

SB784 Labor and Delivery Svcs Written Test.pdf

Uploaded by: Justin Ready

Position: FAV

SB 784 - WLCMD - FAV.pdf

Uploaded by: Michelle Siri

Position: FAV

BILL NO.: Senate Bill 784
TITLE: Health Insurance – Labor and Delivery Services – Cost-Sharing Requirements
COMMITTEE: Finance
DATE: March 8, 2023
POSITION: **SUPPORT**

Senate Bill 784 will require insurance companies, non-profit health service plans, and health maintenance organizations that provide labor and delivery coverage and are regulated by the state to provide those services without a deductible, coinsurance, copayment, or any other cost-sharing requirement. The Women's Law Center of Maryland supports SB784 as it would benefit women and families in several ways.

- Improved maternal and infant health outcomes: Maryland has some of the highest rates of maternal mortality and infant mortality in the country. By removing cost-sharing requirements for labor and delivery, women in Maryland would be more likely to seek out the care they need during pregnancy and childbirth, which could help to improve health outcomes for both mothers and babies. This is particularly acute for Black women, who are more likely to die from pregnancy-related complications than white women, highlighting significant racial disparities in maternal health outcomes.
- Economic security: The high cost of labor and delivery can create a significant financial burden for families, especially those who are low-income or under-insured. This can lead to financial stress and even medical debt. These costs are disproportionately borne by women, who are already facing the gender wage gap and other systemic inequalities. Removing cost-sharing requirements would alleviate this burden and provide greater economic security for families in Maryland.
- Reproductive autonomy: Maryland has a long history of supporting reproductive rights and access to care. Removing cost-sharing requirements for labor and delivery would promote reproductive autonomy and ensure that women in Maryland have control over their reproductive health without concerns of financial barriers.

Overall, removing cost-sharing requirements for labor and delivery in Maryland would be a significant step towards promoting women's health and economic security. It would ensure that all women in Maryland have access to the care they need during pregnancy and childbirth, regardless of their financial situation, and help to address some of the significant health disparities that exist in the state. As such, the WLC urges a favorable report on SB 784. For more information, please contact Michelle Siri at msiri@wlcmd.org.

The Women's Law Center of Maryland is a private, non-profit, legal services organization that serves as a leading voice for justice and fairness for women. It advocates for the rights of women through legal assistance to individuals and strategic initiatives to achieve systemic change, working to ensure physical safety, economic security, and bodily autonomy for women in Maryland.

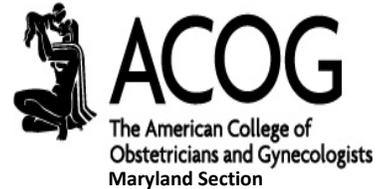
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Uploaded by: Pam Kasemeyer

Position: FAV



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TO: The Honorable Melony Griffith, Chair
Members, Senate Finance Committee
The Honorable Justin Ready

FROM: Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman
Andrew G. Vetter
Christine K. Krone
410-244-7000

DATE: March 8, 2023

RE: **SUPPORT** – Senate Bill 784 – *CHealth Insurance – PLabor and Delivery Services – Cost-Sharing Requirements*

On behalf of the Maryland State Medical Society and the Maryland Section of the American College of Obstetricians and Gynecologists, we **support** Senate Bill 784.

Senate Bill 784 required insurers, nonprofit health service plans, and health maintenance organizations to provide coverage for labor and delivery services without a copayment, deductible, co-insurance, or any other cost-sharing requirements.

This Session, the General Assembly is considering a number of critical initiatives that protect access to and the provision of reproductive health care services. Similarly, labor and deliver services should be accessible and affordable. Currently, many insurance plans have significant deductibles and copayments that significantly disadvantage many low and middle income Marylanders who struggle to meet their cost-sharing responsibilities for labor and delivery services. Passage of Senate Bill 784 is in line with the policies that this General Assembly is seeking to advance. A favorable report is requested.

2023 ACNM SB 784 Senate Side FAV.pdf

Uploaded by: Robyn Elliott

Position: FAV



Committee: Senate Finance Committee

Bill: Senate Bill 784 - Health Insurance - Labor and Delivery Services - Cost-Sharing Requirements

Hearing Date: March 8, 2023

Position: Support

The Maryland Affiliate of the American College of Nurse Midwives (ACNM) supports *Senate Bill 784 - Health Insurance - Labor and Delivery Services - Cost-Sharing Requirements*. The bill requires insurers, nonprofit health service plans, and health maintenance organizations that provide labor and delivery coverage to cover labor and delivery services without a deductible, coinsurance, copayment, or any other cost-sharing requirement.

The Affordable Care Act requires most health plans to cover maternal and newborn care. But because ACA requirements remain broad, insurance coverage isn't uniform. The average out-of-pocket spending for a vaginal delivery is \$2,655, compared to \$3,214 for cesarean births.ⁱ ACNM believes that all people should have access to a safe and affordable birth.

We ask for a favorable report on this legislation. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443.

ⁱ <https://www.forbes.com/advisor/health-insurance/average-childbirth-cost/>

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Uploaded by: Matthew Celentano

Position: UNF



15 School Street, Suite 200
Annapolis, Maryland 21401
410-269-1554

March 8, 2023

The Honorable Melony Griffith
Chair, Senate Finance Committee
3 East
Miller Senate Office Building
Annapolis, MD 21401

Senate Bill 784 – Health Insurance – Labor and Delivery Services – Cost-Sharing Requirements

Dear Chairman Griffith,

The League of Life and Health Insurers of Maryland, Inc. respectfully **opposes** *Senate Bill 784 – Health Insurance – Labor and Delivery Services – Cost-Sharing Requirements* and urges the committee to give the bill an unfavorable report.

Senate Bill 784 requires insurers to provide labor and delivery services to Marylanders without any cost-sharing. The result of this bill could have dramatic impact on premium and we urge the committee to consider the affordability impact before moving forward with this legislation.

Senate Bill 784 would create a new aspect to an already mandated benefit. We would suggest that the removal of cost sharing would certainly create a new financial aspect to the market that must be explored. Under the ACA, each state must pay, for every health plan purchased through the Maryland Health Benefit Exchange, the additional premium associated with any state-mandated benefit beyond the federally mandated essential health benefits. This means, should the Commissioner include the mandate in the State benchmark plan, the State would be required to defray the cost of the benefits to the extent it applies to the individual and small group market ACA plans.

The League opposes any additional mandated benefits to Maryland's law. Mandated benefits add cost to health insurance policies in our state and limit the ability of insurers to design benefits to best meet the needs of enrollees. Given the potential impact to health insurance costs in the State, Maryland law includes a statutory framework for review and evaluation of proposed mandated benefits by the Maryland Health Care Commission under § 15-1501 of the Insurance Article. The law requires the assessment of a proposed mandate for the social, medical and financial impact of the proposed mandate and equips the General Assembly with such information as the extent to which the service is generally utilized by a significant portion of the population; the extent to which the insurance coverage is already generally available; if

coverage is not generally available, the extent to which the lack of coverage results in individuals avoiding necessary health care treatments; if coverage is not generally available, the extent to which the lack of coverage results in unreasonable financial hardship; and the level of public demand for the service. Before adopting this or any other mandated health benefit, we urge the Committee first request an evaluation of the proposed benefit to facilitate an informed decision.

For these reasons, the League urges the committee to give Senate Bill 784 an unfavorable report.

Very truly yours,

A handwritten signature in black ink, appearing to read "Matthew Celentano", with a long horizontal flourish extending to the right.

Matthew Celentano
Executive Director

cc: Members, Senate Finance Committee